

ORDER FOR SUPPLIES OR SERVICES

PAGE 1 OF 3

IMPORTANT: Mark all packages and papers with contract and/or order numbers.

1. DATE OF ORDER 08/19/2004		2. CONTRACT NO. (If any) DTMA8C00029		6. SHIP TO: Tobin Richmond	
3. ORDER NO. IUM36W04015		4. REQUISITION/REFERENCE NO. PRW R0400331		a. NAME OF CONSIGNEE DOT/Maritime Administration, WR Operations	
5. ISSUING OFFICE (Address correspondence to) DOT/Maritime Administration, WR Acquisition 201 Mission Street, Suite 2200 San Francisco CA 94105-1905				b. STREET ADDRESS CAPE FEAR	
				c. CITY Benicia	d. STATE CA
				e. ZIP CODE 94510	
7. TO: a. NAME OF CONTRACTOR Ms. Karen Suarez				f. SHIP VIA	
b. COMPANY NAME Interocean Ugland Management				8. TYPE OF ORDER	
c. STREET ADDRESS 221 LAUREL RD, STE 300				<input type="checkbox"/> a. PURCHASE REFERENCE YOUR: Please furnish the following on the terms and conditions specified on both sides of this order and on the attached sheet, if any, including delivery as indicated.	
d. CITY Voorhees		e. STATE NJ	f. ZIP CODE 08043-2349		
9. ACCOUNTING AND APPROPRIATION DATA - 04 - X303 - 9 - 04 - 33 - - 40SEC0 - 4100 - - 254S - - 0433 - 00461 - - -				10. REQUISITIONING OFFICE DOT/Maritime Administration, Western Region	

11. BUSINESS CLASSIFICATION (Check appropriate box(es)) <input type="checkbox"/> a. SMALL <input checked="" type="checkbox"/> b. OTHER THAN SMALL <input type="checkbox"/> c. DISADVANTAGED <input type="checkbox"/> d. WOMEN-OWNED							
12. F.O.B. POINT Destination		14. GOVERNMENT B/L NO.		15. DELIVER TO F.O.B. POINT ON OR BEFORE (Date) 10/30/2004		16. DISCOUNT TERMS 10 days % 20 days % 30 days % days %	
13. PLACE OF a. INSPECTION b. ACCEPTANCE							

17. SCHEDULE (See reverse for Rejections)

ITEM NO. (a)	SUPPLIES OR SERVICES (b)		QUANTITY ORDERED (c)	UNIT (d)	UNIT PRICE (e)	AMOUNT (f)	QUANTITY ACCEPTED (g)
	SEE LINE ITEM DETAIL						
SEE BILLING INSTRUCTIONS ON REVERSE	18. SHIPPING POINT	19. GROSS SHIPPING WEIGHT	20. INVOICE NO.				17(h) TOT. (Cont. pages)
	21. MAIL INVOICE TO:Ms. Susan Wong						
	a. NAME DOT/Maritime Administration, WR Finance						
	b. STREET ADDRESS (or P.O. Box) 201 Mission St, Suite 2200				\$38,000.00	17(i) GRAND TOTAL	
	c. CITY San Francisco		d. STATE CA	e. ZIP CODE 94105			

22. UNITED STATES OF AMERICA BY (Signature) 		23. NAME (Typed) James D. Barth TITLE: CONTRACTING/ORDERING OFFICER	
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If desired, this order (or a copy thereof) may be used by the Contractor as the Contractor's invoice, instead of a separate invoice, provided the following statement, (signed and dated) is on (or attached to) the order: "Payment is requested in the amount of \$_____. No other invoice will be submitted." However, if the Contractor wishes to submit an invoice, the following information must be provided; contract number (if any), order number, item number(s), description of supplies or service, sizes, quantities, unit prices, and extended totals. Prepaid shipping costs will be indicated as a separate item on the invoice. Where shipping costs exceed \$10 (except for parcel post), the billing must be supported by a bill of lading or receipt. When several orders are invoiced to an ordering activity during the same billing period, consolidated periodic billings are encouraged.

RECEIVING REPORT

Quantity in the "Quantity Accepted" column on the face of this order has been: ☐ inspected, ☐ accepted, ☐ received
by me and conforms to contract. Items listed below have been rejected for the reasons indicated.

SHIPMENT NUMBER	PARTIAL		DATE RECEIVED	SIGNATURE OF AUTHORIZED U.S. GOV'T REP.	DATE
	FINAL				
TOTAL CONTAINERS		GROSS WEIGHT	RECEIVED AT	TITLE	

REPORT OF REJECTIONS

[illegible]

ORDER FOR SUPPLIES OR SERVICES
SCHEDULE - CONTINUATION

PAGE NO.
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IMPORTANT: Mark all packages and papers with contract and/or order numbers.

DATE OF ORDER 08/19/2004	CONTRACT NO. DTMA8C00029	ORDER NO. IUM36W04015
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ITEM NO. (a)	SUPPLIES OR SERVICES (b)	QUANTITY ORDERED (c)	UNIT (d)	UNIT PRICE (e)	AMOUNT (f)	QUANTITY ACCEPTED (g)
0001	<p>CLIN 5001AL CAPE FEAR GRP 36 PH 4</p> <p>CLIN 5001AL CAPE FEAR GRP 36 PH 4 Reimbursable Items</p> <hr/> <p>THE PURPOSE OF THIS DOCUMENT IS TO PROVIDE FUNDING TO THE SHIP MANAGER TO CARRY OUT AND COMPLETE THE VESSEL SECURITY PLAN, APPENDIX 9, SECURITY LIGHTING REQUIREMENT.</p> <p>FUNDING IS PROVIDED AS PER YOUR ESTIMATE DATED JULY 29th, 2004.</p> <p>THIS FUNDING DOCUMENT IS YOUR AUTHORIZATION TO ISSUE SUBCONTRACTS, USING YOUR SMALL PURCHASE PROCUREMENT PROCEDURES.</p> <p><i>Delivery Date</i> 10/30/2004</p> <p>Reference Requisition: PRWR0400331</p> <p><i>Electronic DISTRIBUTION:</i> 4400 S Wong, 4700 C Johnston/T Richmond; Ship Manager</p> <hr/>	1.00	JOB	38,000.000	38,000.00	

TOTAL CARRIED FORWARD TO 1ST PAGE (ITEM 17i) ➡ \$38,000.00